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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application of Dogset Number		
CLAIMS AS FILED – PART I (Column 1) (Column 2)					SMALL E	SMALL ENTITY		OTHER THAN SMALL ENTITY	
FOR NUMBER FILED NUMB			R EXTRA	RATE	FEE		RATE	FEE /	
BASIC FEE (37 CFR 1.16(a))			`		s	OR		s	
TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 =)	x \$ =		OR	x \$ =		
INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 =			/ 			1	·	/	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					X \$= + s =		OR OR	<u> </u>	
* If the difference in column 1 is less than zero, enter "0" in column 2.					TOTAL		OR	TOTAL	1
CLAIMS AS AMENDED - PART II									
2		Column 1)	(Column 2)	(Column 3)	SMALL E	NTITY	OR •		ENTITY
OMENT A	RI	CLAIMS EMAINING AFTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MG	Total (37 CFR 1.16(c))	Minus		=	x \$=		OR	× \$ =	IX
AMENE	Independent (37 CFR 1.16(b))	Minus	~2	= 1	x \$=		OR	× \$ =	
Α	FIRST PRESENTATION	N OF MULTIPLE DEPEND	ENT CLAIM (37 CF	R 1.16(d))	+s =		OR	+s =	
5.9.05 (Column 1) (Column 2) (Column					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	1840
AMENDMENT B	RE	CLAIMS EMAINING AFTER IENDMENT	HIGHEST NUMBER PREVIOUSLY PARS FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	Minus		-	x \$=		OR	x \$=	
EN	Independent (37 CFR 1.15(b))	Minus	3		x \$=		OR	× \$=	
AN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)			R 1,16(d))	+ \$ =		OR	+ s =	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) ((Column 3)					
AMENDMENT C	RE	CLAIMS EMAINING AFTER IENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total * (37 CFR 1.16(c))	Minus	**	=	x \$=		OR	× \$=	
	Independent * (37 CFR 1.16(b))	Minus	***	=	x s=		OR	× \$=	
AN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ \$=		OR	+ s =	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	* If the "Highest Numb * If the "Highest Numb	n 1 is less than the entroer Previously Paid Forer Previously Paid Forer Previously Paid For	" IN THIS SPACE " IN THIS SPACE I	is less than 20, is less than 3, er	enter "20". nter "3".	the appropriat	te hav in a	olumo 1	

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 **CLAIMS AS FILED - PART I SMALL ENTITY** OTHER THAN (Column 1) (Column 2) TYPE SMALL ENTITY OR **TOTAL CLAIMS** NZ 20 RATE FEE RATE FEE OR BASIC FEE FOR 370.00 BASIC FEE NUMBER FILED **NUMBER EXTRA** 740.00 minus 20= TOTAL CHARGEABLE CLAIMS X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 =7) X42 =X84= OR MULTIPLE DEPENDENT CLAIM PRESENT +140= +280= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL LAIMS AS AMENDED - PART II OTHER THAN **SMALL ENTITY** SMALL ENTITY OR Column 1) (Column 3) (Column 2) CLAIMS HIGHEST ADDI-ADDI-4 REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL AMENDMENT **AFTER PREVIOUSLY EXTRA** FEE FEE **AMENDMENT** PAID FOR Total Minus X\$18=X\$9=OR Minus Independent X42 =X84 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140 =OR OR ADDIT. FEE TOTAL ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-8 REMAINING NUMBER PRESENT IENDMENT RATE TIONAL RATE TIONAL **AFTER PREVIOUSLY EXTRA** AMENDMENT PAIDFOR FEE FEE Total Minus X\$9=X\$18= OR Independent Minus *** X42 =X84= OR 4 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280/ +140= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-**AMENDMENT C** REMAINING NUMBER PRESENT TIONAL **RATE** TIONAL RATE AFTER **PREVIOUSLY** EXTRA AMENDMENT PAID FOR FEE FEE Total Minus X\$187 X\$ 9= OR Independent Minus **=**: X42≈ X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= OR If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL OR ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number